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PROGRAMME DEVELOPMENT IN THE EAST ASIA AND PACIFIC REGION

SUMMARY

The present document reports on and analyses major new trends and developments of UNICEF programme cooperation in the East Asia and Pacific region during 1994.

The UNICEF regional office has responsibilities for UNICEF cooperation in the following countries and territories: Brunei Darussalam, Cambodia, China, Democratic People's Republic of Korea, Hong Kong, Indonesia, Lao People's Democratic Republic, Malaysia, Mongolia, Myanmar, Papua New Guinea, Philippines, Republic of Korea, Singapore, Thailand, Viet Nam and the countries in the Pacific region (Cook Islands, Federated States of Micronesia, Fiji, Kiribati, Marshall Islands, Niue, Palau, Samoa, Solomon Islands, Tokelau, Tonga, Tuvalu and Vanuatu).

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I. REGIONAL OVERVIEW

1. The East Asia and Pacific region has an enviable record for high and sustained economic growth. According to the World Bank, the economies of the region grew faster than those of all other regions of the world over the entire period from 1965 to the present. At the same time, absolute poverty has fallen sharply, from one third of the population in 1970 to one tenth in 1990. Living standards in the region have quadrupled in a generation; life expectancy at birth has increased by 45 per cent and mortality among children under five years of age has dropped by some 70 per cent. On a regional basis, population growth, at 1.7 per cent per year, is substantially lower than elsewhere in the developing world. For most countries of the region, the problems of basic survival have been brought largely under control. The under-five mortality rate at the regional level is 56 per 1,000 live births, approximately one half the rate for all developing countries; the infant mortality rate is 42 per 1,000 live births, as compared with 69 per 1,000 live births for all developing countries. More than 90 per cent of the region's children are fully immunized. Adult literacy stands at 80 per cent, and more than 85 per cent of primary school entrants reach grade 5.

2. However, widespread political and economic changes in the region are having major impacts on the situation of children and women. In countries where centrally planned economies are being converted into market-oriented ones, i.e., Cambodia, China, the Lao People's Democratic Republic, Mongolia and Viet Nam, the transformation processes have often led to an overall deterioration in living standards among vulnerable groups as government funded and administered "safety nets" have been wholly or partially dismantled. Another group of countries, including Indonesia, Malaysia, the Philippines and Thailand, is undergoing rapid growth, urbanization and industrialization. In some cases, these processes are widening disparities between the poor and the better-off and creating new marginalized and dispossessed groups. Overall welfare trends may be favourable, but marginal, poor and exploited groups are experiencing stagnant or deteriorating standards of living.

3. In addition, the breakdown of traditional social structures has resulted in more visible increases in child abuse and neglect, family violence, rising crime rates and a weakening of mechanisms for social support and social control. Perhaps the most startling social problem is the rapidity with which human immunodeficiency virus/acquired immune deficiency syndrome (HIV/AIDS) has taken hold in the region. According to the World Health Organization (WHO), the AIDS epidemic is expanding faster in Asia than anywhere else in the world. The impact of AIDS is being felt not only socially and economically, but also on health services. Effective societal responses to such emerging problems must include expanded advocacy, social mobilization and communication efforts; increased support for data collection and analysis; and enhanced attention to problems related to women's participation, children in especially difficult circumstances and the Convention on the Rights of the Child. Increasingly, strategies will need to focus on protection issues, while at the same time sustaining and enhancing gains in basic child survival and development.

4. Political and economic realignment, a major trend resulting from the changing situation of the superpowers, will affect UNICEF advocacy work for children, particularly at the regional level. Many countries are seeking new alliances with independent blocs in pursuit of common political and economic interests. An example is the possible expansion of the Association of South-East Asian Nations (ASEAN) to include new partners such as the Lao People's Democratic Republic, Papua New Guinea and Viet Nam; guest countries such as Cambodia and Myanmar; and consultative partners such as China and the Russian Federation. At the same time, a growing newly affluent public is making increased demands for democratically-elected Governments.

5. Political stability is maintained in a climate of strong economic growth, generally under strong leadership and controlling parties. Equally noteworthy is a much more active and vocal civil society. However, decentralization is another dominant political trend, occurring throughout the region and impacting on programme implementation, budgeting and planning, with broad implications for UNICEF partnerships with Governments. There also has been a resurgence of interest in Asian social values, stemming partly from a fear that what are considered to be traditional values may be undermined by the invasion of Western values through the communications explosion, especially satellite television. The factor of values is one that comes into play on issues of human rights and the Convention on the Rights of the Child - issues of rights being viewed from the perspective of a particular country or value system.

II. CONVENTION ON THE RIGHTS OF THE CHILD AND DECADE GOALS AND STRATEGIES

A. Convention on the Rights of the Child

6. With UNICEF undertaking intensive, high-level advocacy at both country and regional levels, 17 countries, representing the vast majority of the region's population, have ratified the Convention. Three East Asian countries (Brunei Darussalam, Malaysia and Singapore) and seven Pacific Island nations (Cook Islands, Kiribati, Niue, Palau, Tokelau, Tonga and Tuvalu) have not yet ratified the Convention. Intensive advocacy by national and international supporters of ratification in Malaysia and the South Pacific countries has heightened the sense of urgency and mobilized support in those countries that have not yet ratified the Convention. Technical support from the Committee on the Rights of the Child and others has been facilitated by UNICEF.

7. Three countries in the region (Indonesia, the Philippines and Viet Nam) have submitted post-ratification reports on follow-up to the Convention on the Rights of the Child, while in six others (China, the Democratic People's Republic of Korea, the Lao People's Democratic Republic, Mongolia, the Republic of Korea and Thailand), reports are in various stages of preparation. The Viet Nam report in particular has been well received. It gives an open and honest assessment of the current situation in the country, clearly linked with positive yet realistic proposals for rectifying identified shortcomings. In addition to general advocacy and promotion, the regional office has provided technical assistance in nine countries for reviewing laws and policies, conducting public awareness and mobilization campaigns, training government and non-governmental organization (NGO) staff and preparing country reports. At the country level throughout the region, UNICEF advocacy and support have contributed to the creation or strengthening of Convention on the Rights of the Child focal points and the establishment of mechanisms for monitoring child rights and facilitating compliance with the provisions of the Convention.

B. Decade goals and strategies

8. In general, the East Asia and Pacific region has made good progress towards achieving the mid-decade goals, and most countries are on track to achieve and sustain most of them. However, certain countries - Cambodia, the Lao People's Democratic Republic, Myanmar and Papua New Guinea, in particular - face special difficulties owing to poverty and inadequate infrastructure, as well as past and present socio-political instability. A regional consultation on the mid-decade goals with the Executive Director in July 1994 helped to clarify the situation with respect to the goals, and has resulted in a sharper focus on areas where additional efforts have the greatest likelihood of achieving significant gains.

Health

9. Most of the health goals are within reach for the region as a whole and, in several cases, they have already been substantially achieved. Regional immunization coverage is above 90 per cent for all antigens except tetanus toxoid for pregnant women. Only Cambodia, the Lao People's Democratic Republic and Papua New Guinea, among the larger countries, report coverage levels substantially below 80 per cent. Immunization with tetanus toxoid ranges from 3 per cent in China to 97 per cent in the Democratic People's Republic of Korea. China's major strategy against neonatal tetanus is clean delivery, but efforts to immunize at-risk pregnant women are under way. In all countries, the reported number of cases and deaths due to measles and neonatal tetanus is substantially below 1 per 1,000 live births. The main remaining challenge is to assure that the same level is achieved in all local government jurisdictions. A total of about 1,300 cases of poliomyelitis were reported in 1993, mainly in China and Viet Nam, and prospects for eradication throughout the region by the end of the decade are good. In several countries, no cases have been reported for the last several years, but the risk of reintroduction is high where illegal immigration is from countries where cases of the disease may still occur.

10. The goal for oral rehydration therapy (ORT) usage presents special problems. The Democratic People's Republic of Korea, Fiji and Kiribati have achieved the goal. An estimated 29 per cent of all diarrhoeal episodes in the region are treated with ORT, although for individual countries this figure varies between 6 per cent (Cambodia) and 85 per cent (the Democratic People's Republic of Korea). However, a lack of clean water supplies and sanitation means that the incidence of childhood diarrhoea is still high in most countries. As most cases are treated at home and never come to the attention of the health system, both disease control and surveillance are difficult.

11. According to WHO, the rapidly accelerating growth of AIDS in Asia has raised the continent's share of total global cases from 1 per cent in 1993 to 6 per cent in 1994. In the East Asia and Pacific region, a large majority of HIV infections is found in Thailand (approximately 600,000 cases) and Myanmar (200,000 cases). In line with UNICEF headquarters recommendations, four countries in the region - Myanmar, the Philippines, Thailand and Viet Nam - have been selected as strategic programme development countries. Activities in these countries are focusing on reproductive health care, youth health promotion, school-based interventions and communications strategies, respectively.

Nutrition

12. The incidence of moderate and severe under weight has declined very slowly in the region and currently stands at over 20 per cent overall, reaching 35 per cent or more in Cambodia, Indonesia, the Lao People's Democratic Republic, Papua New Guinea and Viet Nam. Only in Mongolia, the Philippines and the Republic of Korea does the level fall below 10 per cent. Micronutrient malnutrition is serious in some parts of the region, but as no country routinely assesses the iodine or vitamin A status in its child population, data are weak. UNICEF advocacy has been instrumental in raising awareness of iodine deficiency disorders (IDD), and universal salt iodization has been adopted formally as a national objective by several countries, including China, Indonesia and Viet Nam. Implementation is hampered in Indonesia, Myanmar and Thailand by the fact that domestic salt production is in the hands of many small producers. For the elimination of vitamin A deficiency, UNICEF assistance has concentrated on biannual distribution of vitamin A capsules. In Malaysia, Myanmar and Thailand, specific areas known to have a high incidence of vitamin A deficiency have been targeted. In Cambodia, the Federated States of Micronesia, Indonesia, Kiribati, the Philippines and Viet Nam, the strategy has been the virtual universal distribution of vitamin A capsules to all children under five years of age. The Baby-Friendly Hospital Initiative (BFHI) has been successful in designating and certifying hospitals in all countries, but free or low-cost breast-milk substitutes remain widely available. China, Indonesia, Malaysia and Thailand

have become particular targets for milk industry advertising and sales promotion. Therefore, efforts are being redoubled to develop an effective strategy for countering those commercial efforts. UNICEF fully supports strategies to raise nutritional status through improved dietary practices.

Education

13. In general, the region is progressing satisfactorily towards achievement of the World Summit goals for education. The weighted regional average for net enrolment at primary level is 95 per cent, and 80 per cent of the children initially enrolling eventually reach grade five. The gross enrolment differential between boys and girls is about 6 percentage points; this is smaller in East Asia and the Pacific than in most other regions. Despite this generally positive picture, there is concern throughout much of the region about the quality of education and the relevance of primary curricula to the requirements of life in the modern world. The achievement of universal access will present serious challenges in several countries, particularly Cambodia, the Lao People's Democratic Republic, Myanmar and Papua New Guinea. At present, primary completion rates in Cambodia, the Lao People's Democratic Republic and Myanmar are less than one third of initial enrolment.

Water supply and sanitation

14. Access to clean water varies considerably within the region, reported at 75 per cent or more in the Democratic People's Republic of Korea, Malaysia, the Republic of Korea and Thailand, and at approximately 25 per cent in Cambodia, Papua New Guinea and Viet Nam. Access to sanitation generally lags far behind access to clean water supplies, reaching 50 per cent or more in only five of the region's larger countries (Indonesia, Malaysia, the Philippines, the Republic of Korea and Thailand), and in several places falling in the 10 to 15 per cent range. Public awareness of the health effects of contaminated water supply and poor sanitation is often low. Donor support for the water supply and sanitation sector is generally weak (UNICEF is the only significant source of external assistance in several countries), and water supply and sanitation have not received the level of policy or budgetary support by Governments that some of the other goals enjoy. UNICEF has supported policies and programmes which emphasize women's involvement and focus on community-based self-help approaches.

III. PROGRAMME PROGRESS AND TRENDS

A. Cooperation with regional institutions

15. Networking, experience exchange and collaboration with regional institutions are integral components of the UNICEF regional office strategy to enhance regional cooperation and emphasize children's issues among Governments, bilateral donors and United Nations agencies. UNICEF staff regularly participate in inter-agency task forces, expert meetings and consultations.

16. High-level contacts with ASEAN were used to promote the Convention on the Right Child. Professional links were established with the ASEAN Institute for Health Development for the joint organization of seminars on primary health care. In collaboration with the WHO regional offices in New Delhi, India, and Manila, Philippines, workshops were conducted on the International Code on Marketing of Breast Milk Substitutes and on universal salt iodization. A training course on lactation management for BFHI was held, with participants from three regional countries. Inter-agency consultations on HIV/AIDS involved the Economic and Social Commission for East Asia and the Pacific (ESCAP), the Food and Agriculture Organization of the United Nations (FAO), the United Nations Development Programme (UNDP), the United Nations Population Fund (UNFPA) and WHO, as well as UNICEF, and regular meetings were held with several United Nations agencies to discuss key women in development issues. The regional office worked closely with ESCAP in planning for the Asia and Pacific

Ministerial Conference in Preparation for the World Summit for Social Development, held in Manila, and contributed materially in drafting the agenda that was ultimately adopted by the Conference.

17. Policy studies and regional workshops were organized in cooperation with the United Nations Educational, Scientific and Cultural Organization and the South East Asian Ministers of Education Organization, including a workshop on school management to promote better quality education. A regional training programme on child labour and street children was conducted in collaboration with the International Labour Organisation (ILO)/International Programme for the Elimination of Child Labour. UNICEF continued to work closely with the regional child rights network ASIANET, focusing on themes related to children in especially difficult circumstances. Links were established or maintained with several research and academic institutions, including the Asia and Pacific Academic Consortium on Public Health, for the production of joint publications; the Institute of Nutrition, Mahidol University (Bangkok, Thailand), in promotion of universal salt iodization and reduction of vitamin A deficiency and protein-energy malnutrition; and Siriraj Hospital, also in Bangkok, for research on double fortification of local foods with iodine and vitamin A.

B. Experience with the application of recent Executive Board policies

United Nations agency and Executive Board member participation in country programme exercises

18. Four countries (China, Indonesia, Myanmar and Viet Nam) undertook country programming exercises during the year. As a matter of accepted practice, representatives of countries which are members of the UNICEF Executive Board are always invited to participate in strategy and preview meetings, and the invitations are usually accepted. In Myanmar, for example, ambassadors and chargés d'affaires from 13 Executive Board member countries participated in a meeting to review the draft master plan of operations, and WHO, FAO and UNDP were involved directly and actively in the framing of the proposed UNICEF country programme. In China, Indonesia and Viet Nam, the above-mentioned agencies, as well as UNFPA, ILO, the World Food Programme, the World Bank and the Asian Development Bank, also were consulted on specific programmes. There has been a clear tendency for countries represented on the UNICEF Executive Board, UNICEF sister United Nations agencies and other multilateral agencies to take an increasingly active interest in programme planning and development exercises.

Gender equity and empowerment of women and girls

19. Although the status of women is generally better in the East Asia and Pacific region than in many other areas, females are still disadvantaged in education and employment opportunities. National commissions for women's affairs have been established widely throughout the region, but only three countries have adopted national policies specifically for women, and only five have ratified the Convention on the Elimination of All Forms of Discrimination Against Women. Efforts to incorporate gender concerns in programming processes have had mixed success, but continue to receive priority effort.

20. The regional office and all country offices participated in the Jakarta preparatory meeting for the 1995 Fourth World Conference on Women to ensure that UNICEF concerns were incorporated into the Declaration and Plan of Action for the Advancement of Women. Country offices have appointed focal points on women in development to promote gender concerns in programme planning and implementation, and gender analysis training has been conducted for UNICEF staff at both regional and national levels. In programme terms, economic empowerment of women through the establishment of credit facilities and other support for income-generating activities in Cambodia, China, the Lao People's Democratic Republic and Viet Nam has been particularly successful. These interventions have made a positive contribution to the welfare of poor rural women and their families.

Emergencies

21. UNICEF contributed $100,000 towards the rehabilitation of health centres and primary schools as part of UNDP/United Nations Department of Humanitarian Affairs emergency relief following the devastating floods in southern China in the summer of 1994. The Philippines received relief and rehabilitation assistance for 18,000 families living on the slopes of Mount Pinatubo, where ash and mud flows related to the 1992 eruption are still major problems. In addition, support was provided for strengthening local capacity for disaster preparedness and management. Funds amounting to $100,354 from the Australian National Committee for UNICEF were provided to Viet Nam for refurbishing facilities and equipment in primary schools and health centres following a typhoon and flooding which affected 9 million people.

Use of global funds

22. China received a total of $950,000 in global funds for activities related to universal salt iodization, BFHI, ORT and improved delivery of tetanus toxoid vaccine. In Indonesia, $800,000 was allocated for the control of IDD and diarrhoeal diseases. Supplies for the expanded programme on immunization (EPI) and IDD were purchased with $200,000 in global funds for the Lao People's Democratic Republic. Mongolia was allocated $165,000 for vaccines and technical assistance to assess cold-chain requirements and for the salt iodization programme, and Myanmar, $979,000 for education, HIV/AIDS, IDD and EPI expansion. The Pacific Islands programme received $2,624 for the procurement of polio vaccine, and in the Philippines, a total of $610,000 was used to support mid-decade goals strategies, including reviews and operations research on IDD and capacity-building for BFHI. In Thailand, $150,000 was used for AIDS/sexually-transmitted disease prevention and early childhood development. For Viet Nam, $86,000 was approved for improvement of programme management, evaluation of a Bamako Initiative project and studies on education.

C. Regional office support to country programmes

23. Assistance was provided for planning and advocacy related to the mid-decade and World Summit goals, organization and coordination of intercountry study visits, participation in regional meetings and workshops, identification of consultants and dissemination of information. Priority attention was given to support for country programme preparation in China, Indonesia, Myanmar and Viet Nam. The regional director, along with other senior staff in the East Asia and Pacific Regional Office, participated in the strategy/preview meetings in all countries preparing submissions to the Executive Board. In Myanmar and Viet Nam, the regional office assisted in organizing and conducting workshops for government officials on country programming processes and procedures. The first regional workshop on social mobilization was held in Bangkok, bringing programme officers together with information and communication staff from UNICEF country offices, the regional office and New York headquarters.

24. In addition, the regional office provided a range of technical advisory services to country offices, covering key programme areas in health, education, the Convention on the Rights of the Child, children in especially difficult circumstances, HIV/AIDS, women's issues and monitoring and evaluation, as well as management assistance in administration, personnel, supply services and information resource management. For example, the regional education adviser took part in a World Bank mission to formulate an education strategy for Indonesia. Regional staff have assisted the Suva sub-office to organize its subregional mid-term review and initiate planning for the programme of cooperation for the period 1996-2000, examining the specific needs of Pacific Islands children now and in the years ahead and how UNICEF assistance might be used most effectively. The UNICEF office at Yangon was assisted in developing a plan of action for collaboration with NGOs, particularly the Maternal and Child Welfare Association in Myanmar. A training workshop in goitre survey methodology and salt testing procedures was conducted in Papua New Guinea, and

regional office staff participated in the preliminary assessment of six hospitals for "baby-friendliness". The regional office provides technical assistance for planning, data gathering and analysis for monitoring and evaluation, and is the focal point for multiple indicator survey methodology. The offices in Cambodia, Indonesia and the Lao People's Democratic Republic have been assisted in planning for monitoring achievement of the mid-decade goals through multiple indicator survey techniques, tracking of programme performance and incorporation of monitoring and evaluation activities into country programmes. Development of indicators for monitoring of children in especially difficult circumstances is an important, newly-emerging area requiring technical assistance by regional staff. With the addition of a post for information resource management, the regional office is now able to provide technical advice and support for development and improvement of computerization and information management in country offices.

D. Trends and prospects

25. As mentioned above, for most countries of the region, substantial progress has been made in recent years in addressing the problems of basic survival and development of children. Although much remains to be done in these areas, the most urgent challenge for a growing number of countries is in the area of protection as a result of the adverse consequences of rapid social change. It is now necessary to find solutions for a newly-emerging set of problems, many of which are in part by-products of the region's economic success. These include: (a) rapid breakdown of community values and traditional forms of social support and control, leading to increased unemployment, rising crime rates and abuse, neglect and exploitation of children; (b) increasing polarization between the poor and the non-poor, and a widening gap separating minority groups, remote and isolated communities and the socially and economically disadvantaged from the mainstream; (c) rapid environmental degradation and deterioration of the physical infrastructure under the stresses of over-exploitation of natural resources and explosive population growth, especially in urban areas; (d) a serious and growing threat of HIV/AIDS, which disproportionately affects the young and disadvantaged, and isolated and minority communities; and (e) in large parts of the region, educational systems that are not only incapable of reaching all children, but which also are unable to provide education appropriate to the demands of the twenty-first century. New programmes of cooperation in China, Indonesia, Myanmar and Viet Nam are highlighting these issues in terms of advocacy and direct programme support.

26. The recent Ministerial Conference in Preparation for the World Summit for Social Development, held in Manila, adopted an agenda for the Asia and Pacific region that gives high priority to the needs and concerns of children. To promote a similar awareness of the importance of children's issues to social development at the Summit, the regional office is preparing an information and advocacy package for distribution in Copenhagen, linking current problems and programmes in the East Asia and Pacific region with the Summit themes of poverty alleviation, employment generation and social integration.